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P.O. Box 1450  
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21369 7590 09/19/2005

CALIPER LIFE SCIENCES, INC.  
605 FAIRCHILD DRIVE  
MOUNTAIN VIEW, CA 94043-2234

09/30/2005 TBESHAH2 00000060 030177 10728528

01 FC:1501 1400.00 DA  
02 FC:1504 300.00 DA  
03 FC:8001 21.00 DA

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## Certificate of Mailing or Transmittal

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Michael Morris (Depositor's name)  
[Signature] (Signature)  
9-28-05 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10728528	12/05/2003	Michael Spald	100/09431	8278

TITLE OF INVENTION: MICROFLUIDIC VISCOMETER

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/19/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
LARKIN, DANIEL SEAN		2856	073-054110		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/123) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Donald R. McKenna  
2 Anh C. Petersen  
3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Caliper Life Sciences, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Mountain View, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 7

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- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-0177 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(a)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

[Signature]

Date 9/27/2005

Typed or printed name Donald R. McKenna

Registration No. 44,822

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I hereby certify that the following documents are being facsimile transmitted to the U.S. Patent and Trademark Office for the patent application identified below:

Examiner: **Daniel S. Larkin**

Art Unit: **2856**

Facsimile No.: **703-746-4000**

Application No.: **10/728,528**

Filing Date: **12/05/2003**

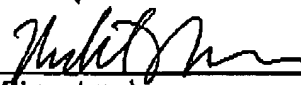
First Named Inventor: **Michael Spaid**

Title: **MICROFLUIDIC VISCOMETER**

Document(s): **Transmittal, Issue Fee Transmittal (PTOL-85)(in duplicate)**

Total Number of Pages, including  
Certificate: **4**

**Michael Moores**  
(Depositor's Name)

  
(Signature)

**Wednesday, September 28, 2005**  
(Date)



PTO/SB/21 (08-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/728,528	
	Filing Date	12/05/2003	
	First Named Inventor	Michael Spald	
	Art Unit	2856	
	Examiner Name	Daniel S. Larkin	
Total Number of Pages in This Submission	3	Attorney Docket Number	100/09431

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63	<b>Remarks</b> Please charge Deposit Account No. 03-0177 for any additional fees associated with this paper or during pendency of this application.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Caliper Life Sciences, Inc.		
Signature			
Printed name	Donald R. McKenna		
Date	9/26/2005	Reg. No.	44,922

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Michael Moore	Date	9-28-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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